concessional rates is inadequate. The excuses given are that they have not been allotted land on concessional rates, the free word has not been mentioned in the lease deed or allotment letters, hospitals are not designated charitable therefore, they are not liable to provide free treatment, and there was no agreed or precise definition of poor to be eligible to get treatment.

Utilisation of Leprosy Eradication staff for other Contagious Diseases in Kerala

2959. SHRI N. K. PREMACHANDRAN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government directed the State Governments to implement the 2nd Phase of Leprosy Eradication Programme;

(b) if so, the details thereof;

(c) whether the State of Kerala has implemented the above project and the amount allocated by Government therefor;

(d) whether the State of Kerala absorbed the excess staff meant for leprosy eradication to the State Public Health Department as per the directives; and

(e) whether Government propose to utilize the services of the staff for leprosy eradication for undertaking National Health Programmes for eradicating other contagious diseases?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) Yes, Sir.

(b) The main features of the 2nd phase of the National Leprosy Eradication programme are:—

(i) Decentralisation and Institutional Development under which State Leprosy Societies to be formed in 27 major States.

(ii) Integration of Leprosy Services with general health care.

(iii) Two rounds of Modified Leprosy Elimination Campaigns (MLEC) for case detection.

(iv) Special Action Projects for Elimination of Leprosy (SAPEL)

and Leprosy Elimination Campaigns (LECs) for difficult/inaccessible/ under served rural and urban areas respectively.

(v) Intensified public awareness campaigns.

(vi) Training of health staff in disability prevention and care.

(vii) Training of General Health Care Staff in leprosy.

(c) Yes, Sir. Rs.74.61 lakhs which includes cost of drugs supplied have been allotted to the State of Kerala during 2001-02.

(d) and (e) Integration of leprosy services with General Health Care Services in Kerala, has not yet started. However, the process for such integration has already started. After integration, the leprosy staff will be involved in all the health care activities/services being imparted by general health care services including in the National Health Programme.

Aids awareness in Eastern States

2960. SHRI SATISH PRADHAN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government's attention has been drawn to the news-item "Eastern States still low on AIDS awareness: report", which appeared in the Indian Express, dated the 16th January, 2002;

(b) if so, the response of Government thereto; and

(c) the corrective steps taken or proposed to be taken by Government in this regard?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A RAJA): (a) Yes, Sir.

(b) and (c) Various programmes are in operation to increase the level of awareness about HIV/AIDS among the people. These include-

Family Health Awareness Campaigns in rural & urban slum areas.

Mass Media campaigns through radio, television and print media.

Targetted interventions programmes for high risk groups.